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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number	14912.833
First Named Inventor	Stephen E. Savas
COMPLETE IF KNOWN	
Application Number	09/997,158
Filing Date	11/28/2001
Group Art Unit	Unassigned
Examiner Name	Unassigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Systems and Methods for Enhancing Plasma Processing of a Semiconductor Substrate

(Title of the Invention)

the specification of which
☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 11/28/2001 as United States Application Number or PCT International

Application Number 09/997,158 and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

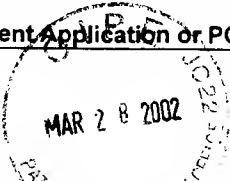
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.
60/250,550	11/30/2000	

(Page 1 of 3)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
		

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 021971 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

Name	Registration Number	Name	Registration Number

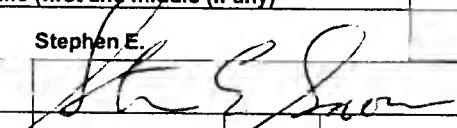
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 021971 OR ☐ Correspondence address below

Name	Michael J. Murphy						
Address	Wilson Sonsini Goodrich & Rosati						
Address	650 Page Mill Road						
City	Palo Alto	State	CA	ZIP	94304		
Country	U.S.	Telephone	650-493-9300		Fax	650-493-6811	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

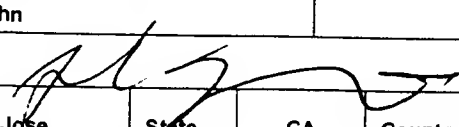
Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Stephen E.				Savas			
Inventor's Signature						Date	2/19/02
Residence: City	Fremont	State	CA	Country	USA	Citizenship	USA
Post Office Address	3550 West Warren Avenue						
Post Office Address							
City	Fremont	State	CA	ZIP	94538	Country	USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John				Zajac			
Inventor's Signature				Date		2/19/02	
Residence: City		San Jose		State		CA	
				Country		US	
Post Office Address		1137 Angmar Court					
Post Office Address							
City		San Jose		State		CA	
				ZIP		95121	
				Country		US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark J.				Kushner			
Inventor's Signature				Date			
City		Urbana		State		IL	
				Country		US	
Post Office Address		1813 Brighton Drive					
Post Office Address							
City		Urbana		State		IL	
				ZIP		61801	
				Country		US	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Ronald L.				Kinder			
Inventor's Signature				Date			
City		Urbana		State		IL	
				Country		US	
Post Office Address		508 W. Illinois					
Post Office Address							
City		Urbana		State		IL	
				ZIP		61801	
				Country		US	

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Given Name (first and middle (if any))				Family Name or Surname			
John				Zajac			
Inventor's Signature						Date	
Residence: City	San Jose	State	CA	Country	US	Citizenship	USA
Post Office Address	1137 Angmar Court						
Post Office Address							
City	San Jose	State	CA	ZIP	95121	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark J.				Kushner			
Inventor's Signature	<i>Mark J. Kushner</i>					Date	1/29/02
City	Urbana	State	IL	Country	US	Citizenship	USA
Post Office Address	1813 Brighton Drive						
Post Office Address							
City	Urbana	State	IL	ZIP	61801	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Ronald L.				Kinder			
Inventor's Signature						Date	
City	Urbana	State	IL	Country	US	Citizenship	USA
Post Office Address	508 W. Illinois						
Post Office Address							
City	Urbana	State	IL	ZIP	61801	Country	US

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Inventor's Signature				Date			
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Given Name (first and middle (if any))				Family Name or Surname			
Mark J.				Kushner			
Inventor's Signature				Date			
City	Urbana	State	IL	Country	US	Citizenship	USA
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Post Office Address							
City	Urbana	State	IL	ZIP	61801	Country	US
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Given Name (first and middle (if any))				Family Name or Surname			
Ronald L.				Kinder			
Inventor's Signature		<i>Ronald Kinder</i>		Date		2/6/02	
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Post Office Address		508 W. Illinois - 601 S. FIFTH - 8					
Post Office Address							
City	Urbana SAN JOSE	State	IL CA	ZIP	61801 95112	Country	US

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